PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10612884

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			40					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			40 minus 20=		* 20			X\$ 9=		OR	X\$18=	360
INDEPENDENT CLAIMS			나 minus 3 =		<u>* 1</u>			X43=		OR	X86=	86
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	·
* If	the difference	less than z	ero, enter	"0" in c	olumn 2	L	TOTAL		OR	TOTAL	1216	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3							· ·	SMALL I	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent + Minus FIRST PRESENTATION OF MULTIPL		Minus	***	CL AINA	=		X43=		OR	X86=	
L	FIRST PRESE	ENTATION OF MIC	JETIPLE DET	-EINDEINI	CLAIIVI		F	+145=		OR	+290=	
								TOTAL ODIT, FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• ·	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=.		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM	ا		+145=		OR	+290=	
\cdot								TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE	
(Column 1) (Column 2) (Column 3)												·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA			ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	:	X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=		OR	X86=	·
	LIHƏ I PHESE	NTATION OF MU	LIIPLE DEP	ENDENT	CLAIM			145=		OR	+290=	
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OP L	TOTAL DDIT. FEE	· .
T	the "Highest Nur he "Highest Num	mber Previously Par ber Previously Paid	id For" IN THIS I For" (Total or	SPACE is Independen	less than It) is the h	3, enter "3." righest number		DIT. FEE L	opriate box		•	